FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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FORM D

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NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

SEC USE ONLY
Prefix Serial
DATE RECEIVED

Washington, DC UNIFORM LIMITED OFFERING EXEMPTION 405 Name of Offering (check if this is an amendment and name has changed, and indicate change.) Fortress Mortgage Opportunities Onshore Fund Series 1 LP Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Fortress Mortgage Opportunities Onshore Fund Series 1 LP Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 1345 Avenue of the Americas, 46th Floor, New York, New York 10105 12-798-6100 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) Brief Description of Business Investment Fund Type of Business Organization corporation limited partnership, already formed other (please specify): business trust limited partnership, to be formed Year Actual or Estimated Date of Incorporation or Organization: 0 3 018 Actual Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) DE

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A. BASIC ID	ENTIFICATION DATA	,	
Enter the information re	equested for the fo	ollowing:			
 Each promoter of t 	the issuer, if the is	suer has been organized v	within the past five years;		
 Each beneficial ow 	ner having the pov	ver to vote or dispose, or di	irect the vote or disposition	of, 10% or more o	f a class of equity securities of the issue
 Each executive off 	icer and director of	of corporate issuers and of	f corporate general and ma	naging partners of	partnership issuers; and
 Each general and r 	nanaging partner (of partnership issuers.			
Check Box (es) that Apply:	✓ Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)			-	
Fortress Mortgage Oppor	tunities Advisor	rs LLC			
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
1345 Avenue of the Amer	icas, 46th Floor,	New York, New York	10105		
Check Box (es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Fortress Mortgage Oppor	rtunities GP Seri	ies 1 LLC			
Business or Residence Addre			ode)	····	· · · · · · · · · · · · · · · · · · ·
1345 Avenue of the Amer	icas, 46th Floor,	New York, New York	10105		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Pull Name (Last name first, i The Variable Annuity Lif		npany			·
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
1 SunAmerica Center, 38	th Floor, Los An	geles, California 90067			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
full Name (Last name first, i	f individual)		- ··		
GT Partners, L.P.					
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
One Commerce Square, S	uite 1900, Mem	phis, Tennessee 38103			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Nume (Last name first, i	f individual)	<u> </u>		·	
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
	(Use bla	ink sheet, or conv and use	additional copies of this s	heet, as necessary)
	,				-

		•		В. Т	NFORMAT	ION ABOU	T OFFERI	NG				
1 Une th	e issuer sol	d or does t	he issuer i	ntend to se	ell to non-a	ccredited i	nvestors ir	this offer	ine?	·	Yes	No MC
1 1100 611	C 1330C1 301	u, or uocs t			n Appendix						L.,	
2 What	is the minin	um investr									\$5,000	,000.00
*#uhje	ct to lesser ar	nounts in the	discretion o	of the Gener	al Partner.						Yes	No
	he offering										R	
commi If a per or state	the informa ission or sin rson to be li es, list the n er or dealer	nilar remune sted is an as ame of the t	ration for s sociated pe proker or de	solicitatior erson or ag- caler. If m	of purchase ent of a brok ore than five	ers in conne er or deale e (5) persoi	ection with r registered as to be list	sales of sec I with the S ed are asso	curities in t SEC and/or	he offering. with a state		
Full Name	(Last name	first, if ind	ividual)		-							
Business O	r Residence	Address (N	Number and	d Street, C	ity, State, Z	(ip Code)		······································		···		
Name of A	ssociated B	roker or De	aler					 				
States in W	hich Person	n Listed Ha	s Solicited	or Intend	s to Solicit	Purchasers				<u>-</u>		
(Checl	c "All State	s" or check	individual	States)	***************************************		**************				□ Al	I States
[AL]	AK	AZ	AR	[CA]	CO	[CT]	DE	DC	FL	[GA]	HI	[ID]
	IN	IA	KS	KY]	LA	[ME]	MD	MA	MI	MN	MS	MO
MIT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	(OK)	OR	PA
RI	SC	SD	TN	[TX]	UT	VT	VA	WA	\overline{WV}	WI	WY	PR
Full Name	(Last name	first. if ind	ividual)			_						
Business o	r Residence	c Address (Number an	d Street. C	ity. State,	Zip Code)						
Name of As	ssociated B	roker or De	aler			<u>. </u>						<u> </u>
States in W	hich Person	n Listed Ha	s Solicited	or Intend	s to Solicit	Purchasers				<u>-</u>		
(Check	"All State	s" or check	individual	States)	***************************************	**************		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			☐ AI	l States
AL	AK	ΑZ	AR	CA	CO	CT	DΕ	DC	FL	GA	HI	ID
	ĪN	<u>IA</u>	KS	KY	LA	ME)	MD	MA	MI	MN	MS	МО
MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
, KI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full Name	(Last name	first, if ind	ividual)	· <u>-</u>							-	
Business o	r Residence	e Address (Number an	d Street, C	City, State,	Zip Code)			·			
Name of As	ssociated B	roker or De	aler									
States in W	hich Person	n Listed Ha	s Solicited	or Intende	s to Solicit	Purchasers						
	"All State							***************************************	.,		□ Al	l States
AL.	AK	[AZ]	AR	CA	CO	[CT]	DE	[DC]	FL	GA	H	ĪD
	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	[N]	NM	NY	NC	ND	ÖН	<u>OK</u>	OR	PA
RI	SC	SD	TN	TX	UT	[VT]	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

t.	tinter the aggregate offering price of securities included in this offering and the total amount alread sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, chec this box and indicate in the columns below the amounts of the securities offered for exchange an	k	
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$0.00	\$0.00
	Equity		\$0.00
	E-quity Common Preferred	\$ <u>0.00</u>	30.00
	Convertible Securities (including warrants)	\$ 0.00	\$0.00
	Partnership Interests		
	Other (Specify)		\$0.00
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.	<u>- 123 340 00000</u>	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in thi offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	:	Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	24	\$ <u>129,900,000,00</u>
	Non-accredited Investors	0	\$0.00
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities and by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	•	S S S S S S S S S S S S S S S S S S S
	Regulation A		
	Rule 504		\$
			s
	Total		\$
	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$ 0.00
	Printing and Engraving Costs		\$ 0.00
	Legal Fees	Z	\$ 0.00
	Accounting Fees	_	\$ 0.00
	Engineering Fees		\$ 0.00
	Sales Commissions (specify finders' fees separately)	_	\$ 0.00
	Other Expenses (identify)	_	\$ 0.00
	Total		

C. OFFERING PRICE			

	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjus	sted gross	\$ <u>129.900.000.00</u>
5.	Indicate below the amount of the adjusted gross proceach of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estin fthe payments listed must equal the adjus	mate and	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		\$ <u>0.00</u>	Ø \$ <u>0.00</u>
	Purchase of real estate			☑ \$ <u>0.00</u>
	Purchase, rental or leasing and installation of macand equipment	hinery		Z \$ <u>0.00</u>
	Construction or leasing of plant buildings and fac	ilities		2 \$0.00 2
	Acquisition of other businesses (including the val offering that may be used in exchange for the asse issuer pursuant to a merger)	ets or securities of another		▽ \$ <u>0.00</u>
	Repayment of indebtedness			✓ \$ <u>0.00</u>
	Working capital		4	✓ \$0.00
	Other (specify): Capital for investment purposes			\$129,900,000.00
				☑ \$ <u>0.00</u>
	Column Totals			[] \$ <u>129,900,0</u> 00,00
	Total Payments Listed (column totals added)		🔽 \$129	.900.000.00
	•	D. FEDERAL SIGNATURE		
ıig	r issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	nish to the U.S. Securities and Exchange	Commission, upon writte	
	uer (Print or Type) rtress Mortgage Opportunities Onshore Fund Series 1 LP	Signature Choose	Date 5/2/08	
٧a	me of Signer (Print or Type)	Title of Signer (Print or Type)		<u> </u>
K	evin J. Treacy	Chief Financial Officer, Fortress Mort	gage Opportunities GP Se	eries 1 LLC
_		<u> </u>		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE	t.	_		· .	
1.		.262 presently subject to any of the disqualification		.,	Yes	No.	

See Appendix, Column 5, for state response.

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the under signed duly authorized person.

Issuer (Print or Type)	Signature	Date
Fortress Mortgage Opportunities Onshore Fund Series 1 LP	1 Chrosey	5/2/08
Name (Print or Type)	Title (Print or Type)	
Kevin J. Treacy	Chief Financial Officer, Fortress Mortg	age Opportunities GP Series 1 LLC

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 2 3 5 Disqualification under State ULOE Type of security and aggregate (if yes, attach Intend to sell offering price Type of investor and explanation of to non-accredited offered in state amount purchased in State waiver granted) investors in State (Part E-Item !) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) Number of Number of Accredited Non-Accredited State Yes No Investors Amount **Investors** Amount Yes No ΛL ٨K ΑZ AR C٨ Interests, \$35,600,000.00 \$35,600,000.00 \$0.00 0 ÇO Interests, \$500,000.00 CT \$500,000.00 0 \$0.00 Interests, \$2,000,000.00 0 DE \$2,000,000.00 \$0.00 DC FL G٨ 111 ID IL IN IΑ KS KY LA ME MD МΛ Interests, \$100,000.00 \$100,000.00 0 \$0.00 ΜI MN MS

APPENDIX 2 3 5 Disqualification under State ULOE Type of security Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of offered in state amount purchased in State waiver granted) investors in State (Part C-Item 1) (Part C-Item 2) (Part E-Items 1) (Part B-Item 1) Number of Number of Non-Accredited Accredited No Investors Yes State Yes No Investors **Amount** Amount MO MT NE NV NH NJ NM Interests, \$7,900,000.00 0 NY 5 \$0.00 \$7,900,000.00 NC ND OH OK OR PΑ RI SC SD TN Interests, \$29,000,000.00 2 \$29,000,000.00 0 \$0.00 TXInterests, \$23,300,000.00 5 \$0.00 0 \$23,300,000.00 UT VT Interests, \$31,500,000.00 V۸ 0 \$31,500,000.00 \$0.00 W٨ WV WI

	•	,,		APP	ENDIX		•	". t"	
1	to non-a	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	f investor and irchased in State C-Item 2)		under St (if yes explan waiver	lification ate ULOE, attach ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									